

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Our Voice PAC

ADDRESS (number and street) ▼

P O Box 8262

☐ Check if different than previously reported. (ACC)

Reno

NV

89507

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00497412

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)July 15
Quarterly Report (Q2)October 15
Quarterly Report (Q3)January 31
Year-End Report (YE)July 31 Mid-Year
Report (Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

C C

(d) 30-Day
POST-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

C C

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Robert Fee

Signature of Treasurer

Robert Fee

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Our Voice PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y 04 / 01 / 2014 To: M M / D D / Y Y Y Y Y 06 / 30 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2014		22594.65
(b) Cash on Hand at Beginning of Reporting Period.....	7545.98	
(c) Total Receipts (from Line 19)	30237.03	69434.86
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	37783.01	92029.51
7. Total Disbursements (from Line 31)	35742.75	89989.25
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2040.26	2040.26
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Our Voice PAC

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
04 / 01 / 2014

To:

M M / D D / Y Y Y Y Y
06 / 30 / 2014
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

27577.03

61647.61

(ii) Unitemized

2660.00

7787.25

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

30237.03

69434.86

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

30237.03

69434.86

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

30237.03

69434.86

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

30237.03

69434.86

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	35742.75	89989.25
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	35742.75	89989.25
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	35742.75	89989.25
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	35742.75	89989.25

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	30237.03	69434.86
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	30237.03	69434.86
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	35742.75	89989.25
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	35742.75	89989.25

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Our Voice PAC

Full Name (Last, First, Middle Initial)

A. CONSERVATIVE CONNECTOR, LLC

Mailing Address 435 E MAIN STREET
SUITE 250

City State Zip Code
GREENWOOD IN 46143

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

16564.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 15 / 2014

Transaction ID : SA11AI.7177

Amount of Each Receipt this Period

8123.00

Full Name (Last, First, Middle Initial)

B. CONSERVATIVE CONNECTOR, LLC

Mailing Address 435 E MAIN STREET
SUITE 250

City State Zip Code
GREENWOOD IN 46143

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

18846.50

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 05 / 2014

Transaction ID : SA11AI.7149

Amount of Each Receipt this Period

2282.50

Full Name (Last, First, Middle Initial)

C. CONSERVATIVE CONNECTOR, LLC

Mailing Address 435 E MAIN STREET
SUITE 250

City State Zip Code
GREENWOOD IN 46143

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

21576.16

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 09 / 2014

Transaction ID : SA11AI.7190

Amount of Each Receipt this Period

2729.66

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

13135.16

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Our Voice PAC

Full Name (Last, First, Middle Initial)

A. PIRYX INC

Mailing Address 144 2ND ST

City

SAN FRANCISCO

State

CA

Zip Code

94105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2836.17

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 01 / 2014

Transaction ID : SA11AI.7319

Amount of Each Receipt this Period

33.42

Full Name (Last, First, Middle Initial)

B. PIRYX INC

Mailing Address 144 2ND ST

City

SAN FRANCISCO

State

CA

Zip Code

94105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2860.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 02 / 2014

Transaction ID : SA11AI.7320

Amount of Each Receipt this Period

23.87

Full Name (Last, First, Middle Initial)

C. PIRYX INC

Mailing Address 144 2ND ST

City

SAN FRANCISCO

State

CA

Zip Code

94105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3051.03

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 08 / 2014

Transaction ID : SA11AI.7321

Amount of Each Receipt this Period

190.99

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

248.28

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Our Voice PAC

Full Name (Last, First, Middle Initial)

A. PIRYX INC

Mailing Address 144 2ND ST

City

SAN FRANCISCO

State

CA

Zip Code

94105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3074.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 14 / 2014

Transaction ID : SA11AI.7323

Amount of Each Receipt this Period

23.87

Full Name (Last, First, Middle Initial)

B. PIRYX INC

Mailing Address 144 2ND ST

City

SAN FRANCISCO

State

CA

Zip Code

94105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3098.77

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 24 / 2014

Transaction ID : SA11AI.7324

Amount of Each Receipt this Period

23.87

Full Name (Last, First, Middle Initial)

C. PIRYX INC

Mailing Address 144 2ND ST

City

SAN FRANCISCO

State

CA

Zip Code

94105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3288.81

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2014

Transaction ID : SA11AI.7325

Amount of Each Receipt this Period

190.04

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

237.78

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 28
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Our Voice PAC

Full Name (Last, First, Middle Initial)

A. PIRYX INC

Mailing Address 144 2ND ST

City State Zip Code
SAN FRANCISCO CA 94105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3379.53

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 01 / 2014

Transaction ID : SA11Al.7326

Amount of Each Receipt this Period

90.72

Full Name (Last, First, Middle Initial)

B. PIRYX INC

Mailing Address 144 2ND ST

City State Zip Code
SAN FRANCISCO CA 94105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3389.08

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 02 / 2014

Transaction ID : SA11Al.7327

Amount of Each Receipt this Period

9.55

Full Name (Last, First, Middle Initial)

C. PIRYX INC

Mailing Address 144 2ND ST

City State Zip Code
SAN FRANCISCO CA 94105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3494.12

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 05 / 2014

Transaction ID : SA11Al.7328

Amount of Each Receipt this Period

105.04

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

205.31

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Our Voice PAC

Full Name (Last, First, Middle Initial)

A. PIRYX INC

Mailing Address 144 2ND ST

City State Zip Code
 SAN FRANCISCO CA 94105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4568.48

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 12 / 2014

Transaction ID : SA11Al.7329

Amount of Each Receipt this Period

1074.36

Full Name (Last, First, Middle Initial)

B. PIRYX INC

Mailing Address 144 2ND ST

City State Zip Code
 SAN FRANCISCO CA 94105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4678.30

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 13 / 2014

Transaction ID : SA11Al.7330

Amount of Each Receipt this Period

109.82

Full Name (Last, First, Middle Initial)

C. PIRYX INC

Mailing Address 144 2ND ST

City State Zip Code
 SAN FRANCISCO CA 94105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5480.45

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 14 / 2014

Transaction ID : SA11Al.7331

Amount of Each Receipt this Period

802.15

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1986.33

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Our Voice PAC

Full Name (Last, First, Middle Initial)

A. PIRYX INC

Mailing Address 144 2ND ST

City State Zip Code
 SAN FRANCISCO CA 94105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5599.82

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 15 / 2014

Transaction ID : SA11Al.7332

Amount of Each Receipt this Period

119.37

Full Name (Last, First, Middle Initial)

B. PIRYX INC

Mailing Address 144 2ND ST

City State Zip Code
 SAN FRANCISCO CA 94105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5738.29

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 16 / 2014

Transaction ID : SA11Al.7333

Amount of Each Receipt this Period

138.47

Full Name (Last, First, Middle Initial)

C. PIRYX INC

Mailing Address 144 2ND ST

City State Zip Code
 SAN FRANCISCO CA 94105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5905.40

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 21 / 2014

Transaction ID : SA11Al.7334

Amount of Each Receipt this Period

167.11

SUBTOTAL of Receipts This Page (optional)..... ►

424.95

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 28
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Our Voice PAC

Full Name (Last, First, Middle Initial)

A. PIRYX INC

Mailing Address 144 2ND ST

City State Zip Code
SAN FRANCISCO CA 94105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5977.01

Date of Receipt

M M / D D / Y Y Y Y Y
05 22 2014

Transaction ID : SA11AI.7337

Amount of Each Receipt this Period

71.61

Full Name (Last, First, Middle Initial)

B. PIRYX INC

Mailing Address 144 2ND ST

City State Zip Code
SAN FRANCISCO CA 94105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5991.33

Date of Receipt

M M / D D / Y Y Y Y Y
05 27 2014

Transaction ID : SA11AI.7338

Amount of Each Receipt this Period

14.32

Full Name (Last, First, Middle Initial)

C. PIRYX INC

Mailing Address 144 2ND ST

City State Zip Code
SAN FRANCISCO CA 94105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6088.25

Date of Receipt

M M / D D / Y Y Y Y Y
05 28 2014

Transaction ID : SA11AI.7339

Amount of Each Receipt this Period

96.92

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

182.85

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 28
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Our Voice PAC

Full Name (Last, First, Middle Initial)

A. PIRYX INC

Mailing Address 144 2ND ST

City State Zip Code
 SAN FRANCISCO CA 94105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6451.14

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 29 / 2014

Transaction ID : SA11AI.7340

Amount of Each Receipt this Period

362.89

Full Name (Last, First, Middle Initial)

B. PIRYX INC

Mailing Address 144 2ND ST

City State Zip Code
 SAN FRANCISCO CA 94105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6474.06

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 30 / 2014

Transaction ID : SA11AI.7341

Amount of Each Receipt this Period

22.92

Full Name (Last, First, Middle Initial)

C. PIRYX INC

Mailing Address 144 2ND ST

City State Zip Code
 SAN FRANCISCO CA 94105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6507.48

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 02 / 2014

Transaction ID : SA11AI.7342

Amount of Each Receipt this Period

33.42

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

419.23

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 OF 28

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Our Voice PAC

Full Name (Last, First, Middle Initial)

A. PIRYX INC

Mailing Address 144 2ND ST

City

SAN FRANCISCO

State

CA

Zip Code

94105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

6531.35

Date of Receipt

06 / 03 / 2014

Transaction ID : SA11Al.7343

Amount of Each Receipt this Period

23.87

Full Name (Last, First, Middle Initial)

B. PIRYX INC

Mailing Address 144 2ND ST

City

SAN FRANCISCO

State

CA

Zip Code

94105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

6555.22

Date of Receipt

06 / 06 / 2014

Transaction ID : SA11Al.7344

Amount of Each Receipt this Period

23.87

Full Name (Last, First, Middle Initial)

C. PIRYX INC

Mailing Address 144 2ND ST

City

SAN FRANCISCO

State

CA

Zip Code

94105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

6578.14

Date of Receipt

06 / 30 / 2014

Transaction ID : SA11Al.7346

Amount of Each Receipt this Period

22.92

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.66

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Our Voice PAC

Full Name (Last, First, Middle Initial)

A. CHARLOTTE ROSS

Mailing Address PO BOX 730

City

NEW VERNON

State

NJ

Zip Code

07976

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

HOMEMAKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

05 / 23 / 2014

Transaction ID : SA11Al.7142

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

B. SO ARIZONA CONSERVATIVE PAC

Mailing Address PO BOX 1504

City

SAHUARITA

State

AZ

Zip Code

85629

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

850.03

Date of Receipt

06 / 30 / 2014

Transaction ID : SA11Al.7184

Amount of Each Receipt this Period

609.03

Full Name (Last, First, Middle Initial)

C. SQUARE INC

Mailing Address 901 MISSION STREET

City

SAN FRANCISCO

State

CA

Zip Code

94103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

365.49

Date of Receipt

05 / 21 / 2014

Transaction ID : SA11Al.7336

Amount of Each Receipt this Period

19.15

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10628.18

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Our Voice PAC

Full Name (Last, First, Middle Initial)

A. SQUARE INC

Mailing Address 901 MISSION STREET

City State Zip Code
 SAN FRANCISCO CA 94103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.79

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 10 / 2014

Transaction ID : SA11AI.7345

Amount of Each Receipt this Period

38.30

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

38.30

27577.03

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Our Voice PAC

Full Name (Last, First, Middle Initial)

A. AT&T

Mailing Address 5000 Meadowood Mall

City Reno State NV Zip Code 89501

Purpose of Disbursement
TELEPHONE

001

Candidate Name

Category/
Type
Office Sought: ☐ House
 ☐ Senate
 ☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 20 2014
Transaction ID : SB21B.7306

Amount of Each Disbursement this Period

98.57

Full Name (Last, First, Middle Initial)

B. AT&T

Mailing Address 5000 Meadowood Mall

City Reno State NV Zip Code 89501

Purpose of Disbursement
TELEPHONE

001

Candidate Name

Category/
Type
Office Sought: ☐ House
 ☐ Senate
 ☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 11 2014
Transaction ID : SB21B.7311

Amount of Each Disbursement this Period

38.62

Full Name (Last, First, Middle Initial)

C. AT&T

Mailing Address 5000 Meadowood Mall

City Reno State NV Zip Code 89501

Purpose of Disbursement
TELEPHONE

001

Candidate Name

Category/
Type
Office Sought: ☐ House
 ☐ Senate
 ☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 23 2014
Transaction ID : SB21B.7313

Amount of Each Disbursement this Period

98.57

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

235.76

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Our Voice PAC

A. Chase ePay

Transaction ID : SB21B.7293

001

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

5380.15

B. Chase ePay

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.7312

001

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

3008.47

C. Jameson Media

Date of Disbursement

Transaction ID : SB21B.7291

004

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

5500.00

SUBTOTAL of Disbursements This Page (optional).....

13888.62

TOTAL This Period (last page this line number only).....

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Our Voice PAC

A. Jameson Media

Date of Disbursement

Transaction ID : SB21B.7302

004

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

5500.00

B. Jameson Media

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.7310

004

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

7500.00

C. HANSEN RASMUSSEN

Date of Disbursement

Transaction ID : SB21B.7307

001

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

1400.00

14400.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Our Voice PAC

A. Southwest Rewards

001

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

2096.40

B. SOUTHWEST AIR

03 / 21 / 2014

002

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

476.00

[MEMO ITEM]

C. STAPLES

001

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

405.49

[MEMO ITEM]

2096.40

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Our Voice PAC

Full Name (Last, First, Middle Initial)

A. STAPLES

Mailing Address

City RENO State NV Zip Code 89502

Purpose of Disbursement
OFFICE SUPPLIES

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 25 2014
Transaction ID : SB21B.7256.3

Amount of Each Disbursement this Period

312.34

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address VASSAR ST

City RENO State NV Zip Code 89502

Purpose of Disbursement
POSTAGE

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 02 2014
Transaction ID : SB21B.7256.4

Amount of Each Disbursement this Period

40.35

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. STAPLES

Mailing Address

City RENO State NV Zip Code 89502

Purpose of Disbursement
OFFICE SUPPLIES

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 05 2014
Transaction ID : SB21B.7256.7

Amount of Each Disbursement this Period

723.87

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 28

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Our Voice PAC

Full Name (Last, First, Middle Initial)

A. Southwest Rewards

Mailing Address P O Box 36647

City State Zip Code
Dallas TX 75235
Purpose of Disbursement
INTEREST EXPENSE

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 20 2014
Transaction ID : SB21B.7256.9

Amount of Each Disbursement this Period

18.07

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Southwest Rewards

Mailing Address P O Box 36647

City State Zip Code
Dallas TX 75235
Purpose of Disbursement
CREDIT CARD CHARGES

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 20 2014
Transaction ID : SB21B.7270

Amount of Each Disbursement this Period

2095.68

Full Name (Last, First, Middle Initial)

C. STAPLES

Mailing Address

City State Zip Code
RENO NV 89502
Purpose of Disbursement
OFFICE SUPPLIES

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 22 2014
Transaction ID : SB21B.7270.0

Amount of Each Disbursement this Period

423.54

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2095.68

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Our Voice PAC

A. USPS

00:

49.00

[MEMO ITEM]

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

B. SOUTHWEST AIR

MM / DD / YYYY

00:

680.00

[MEMO ITEM]

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

C. Southwest Rewards

00-

26.00

[MEMO ITEM]

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 28

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Our Voice PAC

Full Name (Last, First, Middle Initial)

A. Southwest Rewards

Mailing Address P O Box 36647

City	State	Zip Code
Dallas	TX	75235

Purpose of Disbursement
INTEREST EXPENSE

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Transaction ID : SB21B.7270.9

Amount of Each Disbursement this Period

23.83

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Southwest Rewards

Mailing Address P O Box 36647

City	State	Zip Code
Dallas	TX	75235

Purpose of Disbursement
CREDIT CARD CHARGES

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		20		2014

Transaction ID : SB21B.7281

Amount of Each Disbursement this Period

90.44

Full Name (Last, First, Middle Initial)

C. Southwest Rewards

Mailing Address P O Box 36647

City	State	Zip Code
Dallas	TX	75235

Purpose of Disbursement
INTEREST EXPENSE

001

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		20		2014

Transaction ID : SB21B.7281.2

Amount of Each Disbursement this Period

23.45

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

90.44

--

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Our Voice PAC

Full Name (Last, First, Middle Initial)

A. ROBERT TESEMailing Address 1281 TERMINAL WAY
SUITE 108

City RENO State NV Zip Code 89502

Purpose of Disbursement
ACCOUNTING FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y
04 19 2014**Transaction ID : SB21B.7300**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. RICK TRADER

Mailing Address 766 MAPLE RD

City DEPTFORD State NJ Zip Code 08096

Purpose of Disbursement
RADIO COMMERCIAL TIME

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y
06 10 2014**Transaction ID : SB21B.7286**

Amount of Each Disbursement this Period

1950.00

Full Name (Last, First, Middle Initial)

C. Wells Fargo

Mailing Address 200 S. Virginia St.

City Reno State NV Zip Code 89501

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y
04 30 2014**Transaction ID : SB21B.7301**

Amount of Each Disbursement this Period

30.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2480.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Our Voice PAC

Full Name (Last, First, Middle Initial)

A. Wells Fargo

Mailing Address 200 S. Virginia St.

City Reno State NV Zip Code 89501

Purpose of Disbursement
BANK FEES

001

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 10 / 2014

Transaction ID : SB21B.7309

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

35491.50